CITY OF MILWAUKEE
HEALTH DEPARTMENT

Clinical Laboratory Update

May 2022
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Sexually Transmitted Infections

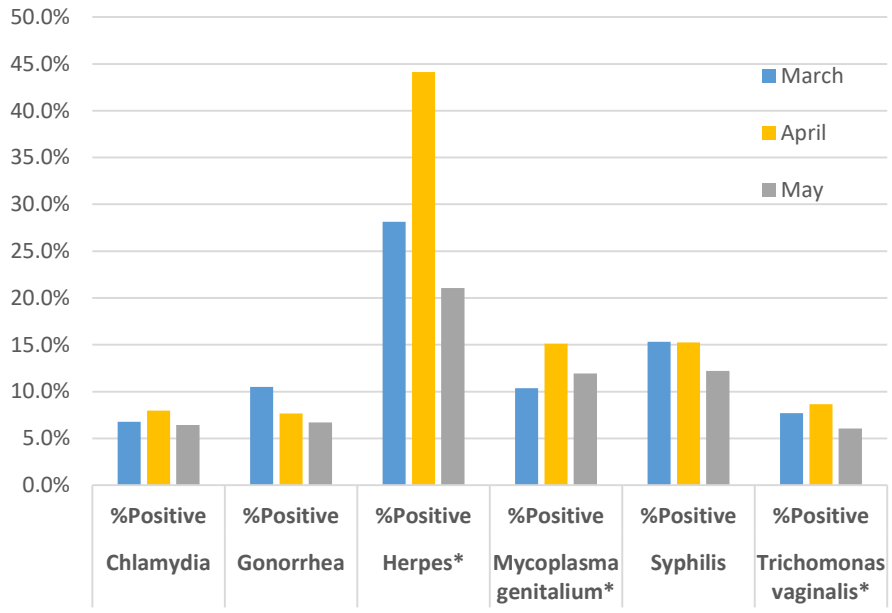


Figure 1: Percent positivity for specimens screened using molecular or serological assays for the given organism.

*Not reportable as per WI DHS 145.04 (3) (a)

Syphilis Surveillance

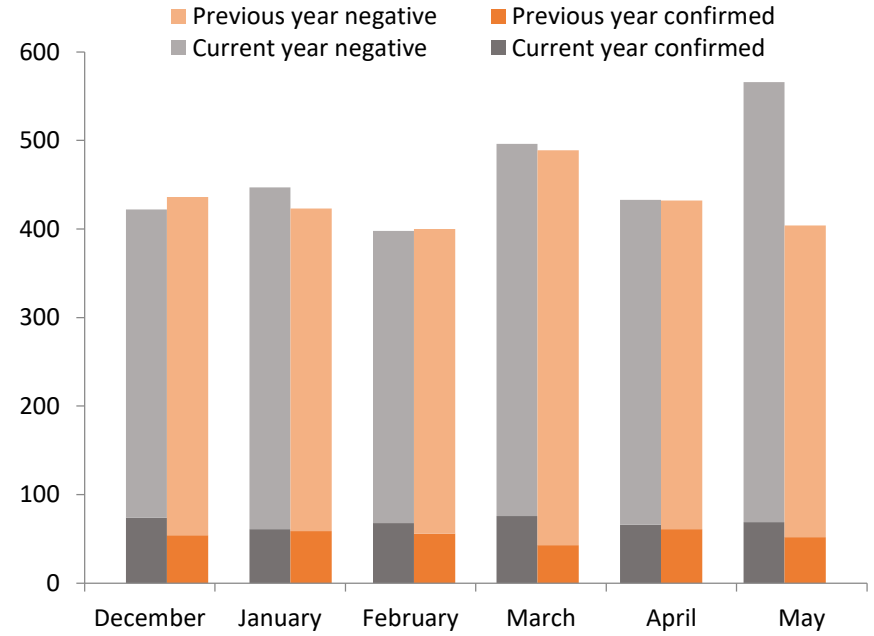


Figure 2: Monthly comparison of syphilis data with year over year comparisons.

Number of specimens screened at MHDL, darker bars represent confirmed tests.

Connect Milwaukee Health Department:

From the desk of the Public Health Laboratory Director

Monkeypox- Recommendations for Laboratory Testing

The public health laboratories are part of CDC Laboratory Response Network (LRN) and are capable of conducting PCR testing per LRN algorithm. If laboratory is notified by a clinician or Local Health Department of a suspected case of monkeypox, WI DHS needs to be contacted at 608-267-9003. DHS will conduct screening and consult CDC to determine if testing is necessary and will notify WSLH or MHDL if a test is approved. WSLH or MHDL will submit all specimens with non-variola orthopoxvirus positive PCR results to the CDC for monkeypox virus testing.

The Clinicians are advised to collecting two dry swabs from multiple lesions per CDC- LRN. Proper safety measures are critical to minimize the risk of laboratory transmission when testing routine clinical specimens for confirmed or suspected monkeypox patients. All specimen manipulations should be performed within a Class II (or higher) biological safety cabinet using enhanced BSL-3 practices.

- CDC Case Definitions for Monkeypox 2022: https://www.cdc.gov/poxvirus/monkeypox/clinicians/case-definition.html
- Wisconsin DHS Health Alert #44: Monkeypox: Recommendations for Detection and Reporting https://content.govdelivery.com/accounts/WIDHS/bulletins/31a58e0
- Monkeypox and Orthopoxvirus Global Map: https://www.cdc.gov/poxvirus/monkeypox/response/2022/world-map.html

Links to related information & data:

MHDL COVID-19 Testing website
MHD COVID-19 Situation
WSLH Laboratory Surveillance Report

WI SARS-CoV-2 Genomic Dashboard:
https://dataportal.slh.wisc.edu/

CDC COVID-19 Data Tracker:
https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview/index.html

New HIV Infections

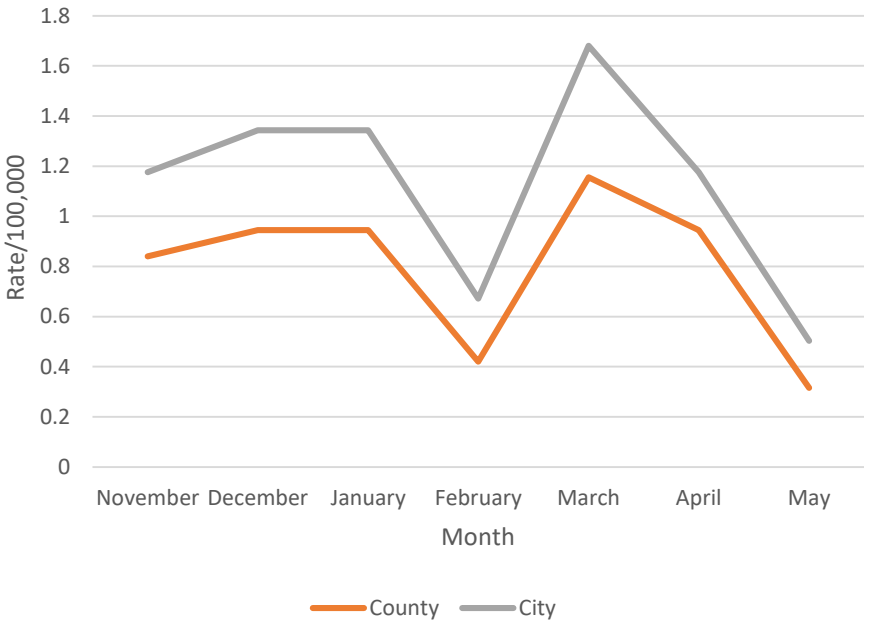


Figure 3: Monthly comparison of rate of new HIV infections in Milwaukee County and the City of Milwaukee, using data obtained from the Wisconsin Department of Health Services. Numbers are provisional and subject to change.

For statewide HIV data, visit: https://www.dhs.wisconsin.gov/hiv/data.htm

Sexually Transmitted Infections by Source

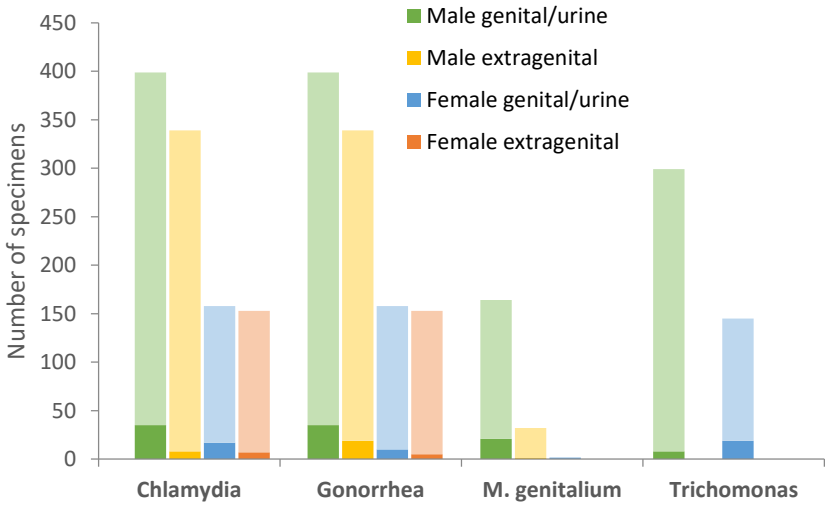


Figure 4: Distribution of STIs detected using NAAT. In May 2022 5.8% of male and 7.7% of female specimens screened were positive for Chlamydia. 7.3% of male and 4.8% of female specimens were positive for Gonorrhea. 11.2% of male and 1 of the 2 female specimens were positive for *M. genitalium*. 2.7% of male specimens and 13.1% of female specimens were positive for *Trichomonas*.

Note: Darker bars indicate positive specimens.

Gonorrhea Antimicrobial Susceptibility Testing

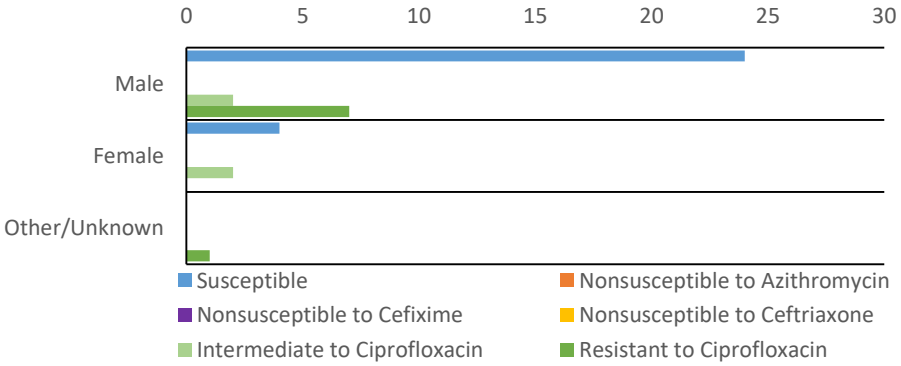
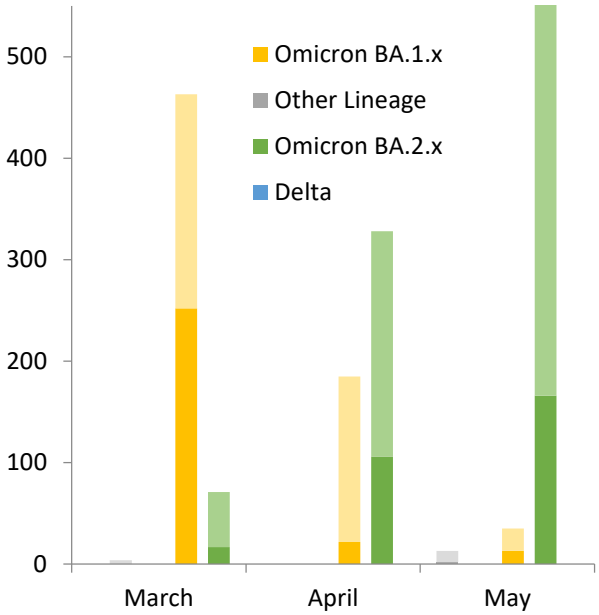
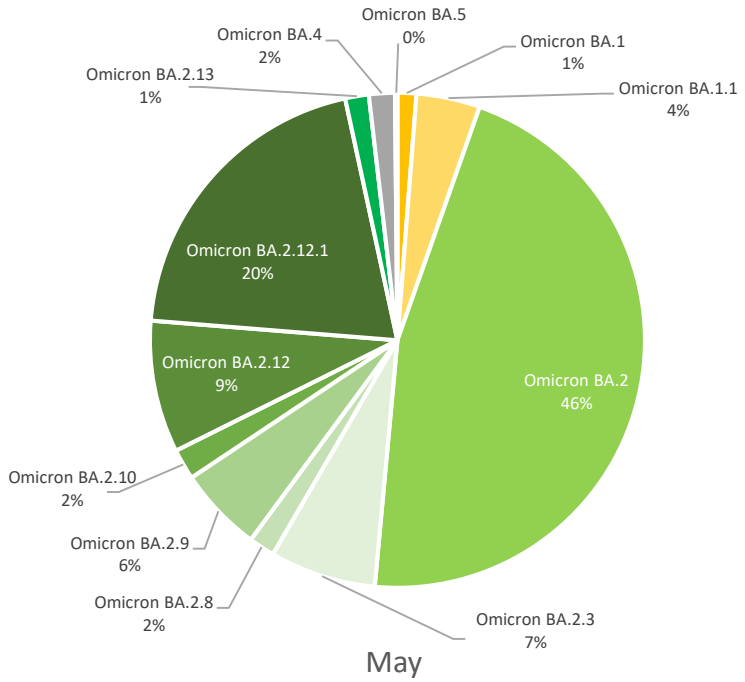


Figure 5: Antibiotic susceptibility profile of Gonorrhea isolates identified in males and females. In May 2022, 12 of 41 cultures tested were found to be intermediate or resistant to Ciprofloxacin according to CLSI guidelines. MHDL tests for antibiotic resistance to Ceftriaxone, Cefixime and Ciprofloxacin.

SARS-CoV-2 Sequencing Surveillance

Figure 6: Whole genome sequencing of SARS-CoV-2 surveillance isolates. Below: monthly totals. Right: Current month variant report.





Viral Surveillance

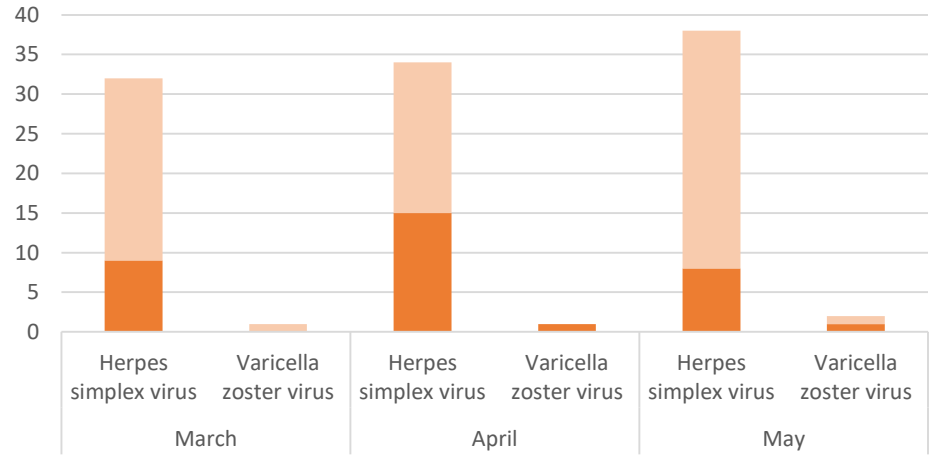


Figure 7: Specimens tested using molecular methods.

Note: Height of bar indicates number of specimens tested.

Darker bars indicate DNA/RNA detected by virus culture, real-time PCR and/or nucleotide sequencing analysis.

Respiratory Infections

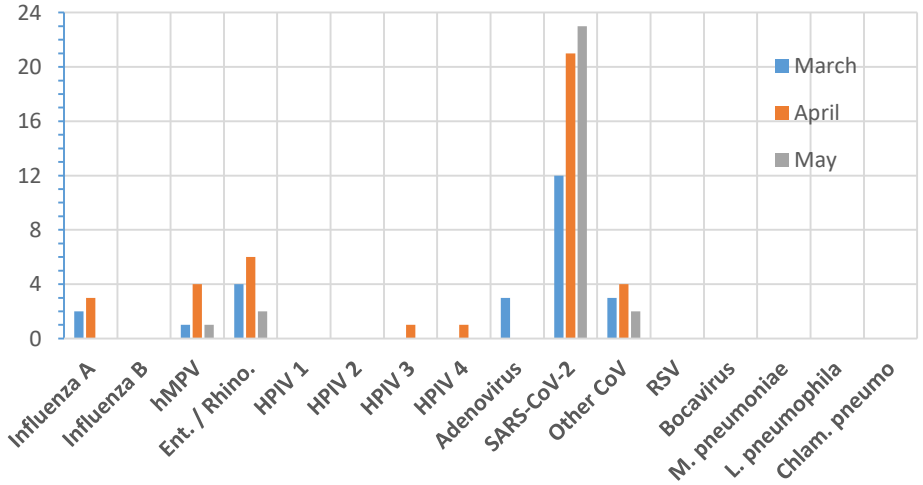


Figure 8: Respiratory pathogens detected using a Respiratory Pathogen Panel (RPP) and/or RT-PCR Influenza assay.